

## **2022 ORGANIC SYSTEM PLAN (OSP) – CROP PRODUCTION**

### **Instructions**

- Complete this OSP if you are requesting or renewing organic crop certification
- Complete OSPs are required prior to inspection of each requested scope
- Crops must be managed in full compliance with NOP §205.240
- OSPs submitted and received late may result in a Notice of Noncompliance

### **For office use only:**

OSP Received On: _____ Entered Into Database On: _____ By (Initials): _____ Initial Cert. Date: _____			
Assigned To: Reviewer (Last name): _____		Primary Review Completed On: _____	
Inspector (Last name) _____		Inspector's Review Completed On: _____	
Inspection Completed On: _____		Director Reviewed On: _____ Initials: _____	
Request Form # _____		Documents Received On: _____ Initials: _____ <input type="checkbox"/> NA	
Database Updated On: _____ Initials: _____		Certificate Mailed On: _____ Initials: _____	
Date payment rec'd: _____		Amount: _____ Check #: _____ Cash: _____	

### **SECTION 1: General Information §205.201, §205.401**

Farm Name: _____		Year first certified: _____	NHDAMF Cert #: _____
Owner/ Manager Name: _____		Name of Authorized Person who will be at the inspection: _____	
Mailing Address: _____			
Physical Address: <input type="checkbox"/> Same as mailing _____			
Best phone number: _____	Email: _____	Website: _____	
<b>Organizational structure/legal status:</b>			
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Trust or non-profit <input type="checkbox"/> Cooperative <input type="checkbox"/> Legal Partnership (federal form 1065) <input type="checkbox"/> LLC			
<input type="checkbox"/> Corporation; list state of incorporation & name _____ <input type="checkbox"/> Other-specify _____			

Check those crops you grow and harvest for which you are seeking organic certification:

- ☐ Seedlings (for sale): \_\_\_\_\_
 ☐ Vegetables   
 ☐ Herbs   
 ☐ Mushroom
- ☐ Potted Plants; types: \_\_\_\_\_
 ☐ Small Fruit Type: \_\_\_\_\_
- ☐ Flowers, cut or edible   
 ☐ Tree Fruit Type: \_\_\_\_\_

Inspectors Change: Please provide **detailed** directions to your farm/production site from Concord, NH

## Section 2: Affirmation

- ❖ I have a copy of the NHDAMF organic regulations and the USDA National Organic Program (NOP) regulations, with which I have read, understand and agree to follow for organic certification.
- ❖ This Organic System Plan has been completed to the best of my ability, with accurate and forthcoming information.
- ❖ I understand that acceptance of this Organic System Plan in no way implies granting of certification by NHDAMF.
- ❖ I will immediately notify NHDAMF of any change in my certified operation or portion of it that may affect its compliance with NHDAMF organic Rules and the USDA National Organic Program (NOP) Regulations
- ❖ I understand that the operation may be subject to unannounced inspections and/or sampling for residues at any time.
- ❖ I agree to submit applicable fees charged according to the fee schedule by NHDAMF.

My signature confirms that I have read, understand, and agree to the aforementioned statements



\_\_\_\_\_  
Signature of Applicant/Authorized Representative

\_\_\_\_\_  
Date

---

## Section 3: ORGANIC CERTIFICATION HISTORY

Name(s) of any certifying agent(s) other than NHDAMF to which an application has been previously made, and date(s) of application:

\_\_\_\_\_  
Outcome of submission(s):\_\_\_\_\_

If you have received any notices of non-compliance or denial of certification, please attach these with a description of actions taken to correct the non-compliances, including evidence of correction. ☐ Attached

Did you receive a Conditions for Continued Certification (CCC) letter from NHDAMF last year? ☐ Yes ☐ No

Did you receive a Notice of Non-compliance (NNC) from NHDAMF last year? ☐ Yes ☐ No

If yes, please describe CCC and/or NNC and corrective actions implemented:

**Note: Corrective actions along with any supporting documentation will be reviewed during inspection.**

**SECTION 4: Crop Production Overview §205.201-§205.406**

Check the box that describes your operation's production system:

☐ All organic

☐ Organic and non-organic production

Do you own all of the land for which you are requesting certification?

☐ Yes ☐ No

If No, you must submit a NHDAMF Landowner Statement for each leased/rented/used land area. ☐ Attached ☐ On file at NHDAMF

Are all landowner statements on file and up to date?

☐ Yes ☐ No

Any field or farm parcel from which harvested crops are intended to be sold, labeled, or represented as "organic", must be in accordance with **NOP Rule §205.202**

**Land Information Table:** State the first year that each field was used. If the size is less than ¼ acre, indicate in square footage

Field Location	Field #, ID or Name	Map #	Size= Acres or sq ft	1 <sup>st</sup> Year	Organic	Transitional	Conventional	(X) Owned	(X) Leased	Owner's Name & Address

**Field maps are to be submitted for each parcel that is being certified under this OSP and must indicate the following:**

☐ Farm name ☐ Year ☐ Acres/square footage ☐ Field name(s)/number(s) ☐ Buffers ☐ Slope(s)

☐ Adjoining land use(s) ☐ Landmarks such as buildings, farm or public roads, railroad tracks

☐ Windbreaks, hedgerows or woodlands ☐ North arrow

Maps should be 8 ½" x 11". This may be a county parcel map, Farm Service Agency map, aerial photograph, or a detailed hand-drawn map, as long as it is clearly readable when photocopied. This map must be current and dated. An updated (revised or new) map must be submitted whenever information on the map changes (field numbers, acres, buffers, adjoining land use, etc.)

**Boundaries, Adjacent Land Use and Buffer Areas §205.202(c)**

1. Describe your farm borders and adjacent land use (organic farms, fallow fields, wild lands, non-organic crop or livestock production, residential use, etc.)

2. Describe the measures you take (management practices, communications and/or physical barriers) to prevent contamination by prohibited materials that are or may be applied to adjacent or nearby land.

☐ **No areas of concern**

3. Describe buffer areas for each field that you maintain on your organic land to protect crops from contamination.

☐ **No buffer required**

**NHDAMF Materials Use Table****§205.103, §205.203, 205.238, 205.600-606**

**Producers are responsible for using only products that meet NOP standards. During your inspection be prepared to review: product labels, ingredient lists, invoices and other relevant documentation.**

The National List of Allowed and Prohibited Substances is an important part of the organic standards and impacts your options for material inputs. In addition, the allowed use of materials may be established by an EPA "For Organic Production" label, by the brand name listed on the Organic Materials Review Institute (OMRI), Washington State Department of Agriculture (WSDA) List, Pennsylvania Certified Organic (PCO) List or a list maintained or recognized by DAMF. If the materials do not appear on one of these lists, you must obtain approval from DAMF by submitting a label or other documentation from the manufacturer that discloses all ingredients. Active and inactive ingredients in a material used must be disclosed and approved per the National Organic Standards. Failure to verify organic compliance and/or use of an unapproved material may jeopardize organic certification and may result in a compliance action.

1. List all materials (inputs) you use or plan to use: soil amendments--fertilizers, minerals, micronutrients, compost, manure, growing media; inoculants and seed treatments; pest / disease / weed management substances and adjuvants; crop production aids, or any other materials applied to soil, crops, water, or stored products; as well as cleaners and sanitizers. Using products or inputs that are not listed on your materials list puts your certification at risk.

Material Brand Name	Source/Manufacturer	Purpose/Reason for Use/Applied To	Indicate Verification of Use: National List, OMRI, WSDA, PCO or NHDAMF	Note any Restrictions or Annotations	*DAMF Review

2. Do you carry a current NHDAMF PESTICIDE APPLICATORS LICENSE or GENERAL USE PERMIT? ☐ Yes ☐ No

If yes, provide your Pesticide License/Permit #: \_\_\_\_\_

**\*If additional space is required, please print additional sheets.**

For DAMF Use Only	Initial Reviewer	Inspector
All materials reviewed?		
Is the table complete?		
Verified and accurate?		
Observations/comments		

## Section 6: Seed and Planting Stock §205.204

1. If non-organic seed is used, is documentation available to verify that;
  - a) It is not a "genetically engineered" variety ☐ Yes ☐ No
  - b) An organic equivalent variety is not available ☐ Yes ☐ No
  - c) It is untreated or treated with an allowed substance ☐ Yes ☐ No
2. Invoices of purchased organic annual planting stock will be provided during inspection\_\_\_\_\_
3. Seeds and Annual Planting Stock; check all that you use or plan to use:

- ☐ Not Applicable; no seeds or annual planting stock used or planned for use
- ☐ Certified organic seed, purchased
- ☐ Certified organic seed, saved on farm (requires records)
- ☐ Certified organic planting stock (e.g. seed potatoes, sweet potato slips, garlic, strawberry crowns)
- ☐ Non-organic, untreated seed
- ☐ Non-organic, untreated planting stock for annual crops
- ☐ No GMO seeds purchased or planted
- ☐ Certified organic planting stock, saved on farm (requires records)

Based on your seed purchases/use fill in the information below:

### **Not to include flower seeds**

# of organic varieties \_\_\_\_\_ # of non-organic varieties \_\_\_\_\_ % organic varieties \_\_\_\_\_ ☐ NA

4. Seed or Planting Stock Treatments and Inoculants:

- ☐ Not Applicable; none used
- ☐ Pelletization
- ☐ Disinfection
- ☐ Inoculant
- ☐ Priming
- ☐ Other (describe): \_\_\_\_\_
- ☐ Coating
- ☐ Fungicide or insecticide

Please list specific treatments and inoculants:

5. Annual Seedlings:

- ☐ Not Applicable; no annual seedlings grown or purchased
  - ☐ Sold as finished certified organic crop ►
  - ☐ Seedlings or transplants grown on farm; Complete the Greenhouse Crop Production Section (GHCPs)
  - ☐ Seedlings or transplants grown off farm, at address other than applicant's; Complete the GHCPs
  - ☐ Purchase certified organic seedlings; List supplier(s) below and attach organic certificate(s)
- ☐ **Seedling Inspection Required**  
☐ Attached  
☐ Attached  
☐ Attached

6. Perennial Planting Stock: (for crops grown as perennials: e.g., trees, shrubs, vines)

- ☐ Not Applicable; no perennial planting stock is used
- ☐ Certified organic perennial planting stock is: ☐ Purchased ☐ Produced/propagated on farm
- ☐ Non-organic stock (describe below; include date planted or anticipated planting):

## Section 7: Greenhouse Crop Production §205.200, §205.201(a)(5), §205.202(c)

❖ Complete this page if you produce organic seedlings or crops in a greenhouse (GH), high tunnel (HT) or cold frame (CF) ☐ NA

### 1. Indicate the scope of your GH, HT and/or CF operations:

- ☐ GH, HT, or CF production is part of my farming operation and located on certified organic land
- ☐ Location(s), ID(s), and size(s) are indicated on farm map of each GH, HT and CF
- ☐ This operation consists primarily or exclusively of greenhouse production
- ☐ I sell seedlings, potted annual and/or perennial plants (\*\*)
- ☐ I produce seedlings, potted annual or perennial plants at an off-farm facility (\*\*)

#### **\*\*NOTE:**

An inspection is required prior to selling plants, including off-farm facilities. GH, HT and CF information must be entered in the Land Requirement Table

Address and detailed directions from Concord, NH to the off-farm production site:

Explain the agreement you have in place with the owner of the off-farm site to prevent contamination of your organic production:

### 2. Describe structure type(s); include structure ID(s) and size(s):

Greenhouses:

High Tunnels:

Cold Frames:

### 3. Describe your GH, HT, CF crops; check all that apply:

- ☐ Annual seedlings    ☐ Perennials    ☐ Cut flowers    ☐ Herbs    ☐ Harvested crops (e.g. fruits, vegetables)

Are crops grown in the ground?    ☐ Yes    ☐ No

Are crops grown in containers?    ☐ Yes    ☐ No

● Include planting medium on the Materials List

**Section 8: MUSHROOM PRODUCTION §205.201–§205.406**☐ NA

1. List types of mushrooms being grown: \_\_\_\_\_

2. Do you have any non-organic mushroom production? ☐ Yes ☐ No

If "yes," identify all nonorganic mushroom production areas/facilities on map.

3. Is organic mushroom production site indicated on farm map? ☐ Yes ☐ If No, state location:

4. Describe your production steps in mushroom production:

5. If growing organic and nonorganic mushrooms, describe the management practices used to prevent commingling:

**Spawn**

1. List all the spawn used, and their sources, for your mushroom production:

MATERIAL	SOURCE Company name and address

2. Verification of certified organic spawn will be available for review during the inspection \_\_\_\_\_

3. If non-organic spawn is used, documentation will be available for review to verify that it is not a "genetically engineered" variety, it is not treated with any prohibited substances and an equivalent variety was not available \_\_\_\_\_

**Growing Materials**

• All growing materials are included on materials list \_\_\_\_\_

1. List all the materials used, and their sources, for your mushroom production:

MATERIAL	SOURCE Company name and address

2. Is inoculation sealant used? ☐ Yes ☐ No If Yes, list type and source \_\_\_\_\_

3. Verification of NOP compliance for materials used will be available for review during the inspection \_\_\_\_\_



## Section 9: SPLIT OPERATIONS: Organic and Non-organic Operations

### COMPLETE THIS PORTION ONLY IF YOU GROW ORGANIC AND NON-ORGANIC CROPS

Do you produce both organic and non-organic greenhouse crops?

☐ Yes ☐ No, organic only

If Yes, describe the management practices and physical barriers used to prevent commingling or contamination for:

Planting Medium (include soil mix materials, wetting agents and fertilizer materials), soil mixing, and seeding equipment	
Ventilation system—prevention of drift of prohibited materials	
Irrigation system: Identify water source, use of water with respect to fertilizer materials and equipment.**	
Production or growing areas—separation and identification	
Plant Containers—cleaning & cleaning materials	
Plant and Container Identification—labels and tags:	

\*\*If water lines are shared, attach a diagram of piping, pumps, valves and backflow preventers, as applicable.

☐ Diagram attached ☐ Not Applicable; separate equipment and water lines dedicated to organic.

## Section 10: Soil Management and Crop Rotation §205.203, §205.205

1. What are the major components of your crop nutrient management plan?

☐ Manure ☐ Green manures ☐ Compost ☐ Mulch ☐ Cover Crops  
☐ Mined Lime ☐ Biodynamic Preparations ☐ Incorporation of Crop Residue  
☐ Fertilizer Materials ☐ Soil Inoculants ☐ Other(Describe)\_\_\_\_\_

2. Check to confirm that your proposed crop rotation plans are attached.

Implemented crop rotation plan will be provided during inspection. \_\_\_\_\_

3. Was your soil tested in the last year?

If yes, please describe any deficiencies indicated in your soil test results:

\_\_\_\_\_

If no, when was your soil last tested? \_\_\_\_\_ When do you plan to test the soil next? \_\_\_\_\_

4. Check to confirm that all materials used, or planned for use, are listed on the Materials List \_\_\_\_\_

5. For perennial crops, in lieu of rotating crops, describe how you introduce biological diversity, such as implementing ground cover, alley cropping, intercropping or hedgerows into the system.

6. For each of the components checked in #1, describe the issue being addressed and why the practice has been implemented:

7. For each of the components checked in #1, describe the frequency of each practice that has been implemented:

8. Describe, in some detail, how you know your soil management practices are effective:

**Please Note:** The producer must implement a crop rotation including but not limited to sod, cover crops, green manure crops, and catch crops that provide the following function that are applicable for the operation: maintain or improve soil organic matter content, provide for pest management in annual and perennial crops, manage deficient or excess plant nutrients, and provide erosion control.

The crop rotation requirement applies to all locations where crops are grown in the ground: fields, high tunnels and greenhouses.

9. Describe your crop rotation plan for each field, high tunnel, and greenhouse, as applicable. What do you consider when determining where to grow each crop? What goals can be met and problems addressed through rotation?

10. Complete the table to illustrate your cropping history for each unique location (field, high tunnel, and greenhouse). Be sure to include all 4 seasons as applicable.

11. Check if you have submitted your own crop history form\_\_\_\_\_

**Name of Location:**

ID Row/Plot	Crop and Family Planted for 2019	Crop and Family Planted in 2020	Crop and Family Planted in 2021	Crop and Family Projected for 2022

**Three Year Field History for Annual Crops:**

12. Document all Soil Amendments, Fertility Inputs, & Pest and Disease Controls for the last three consecutive years and your projected inputs for the coming year.

Year	Field/Plot	Organic Matter Inputs (Product & Rate)	Fertility Inputs (Product & Rate)	Insect Control (Product & Rate)	Disease Control (Product & Rate)	Weed Control (Product & Rate)
2019						
2020						
2021						
Projected for 2022						

Three Year Production History for Perennial Crops:

☐ NA

13. Complete the table for each **perennial** crop (e.g. blueberries, rhubarb, apples) over each of the past three years:

Crop	Year			Acres or Square Feet			Total Yield		

SECTION 11: Soil Fertility and Crop Nutrient Management

Manure Use. NOP Rule Section 205.203(c)(1) requires that:

❖ Raw manure needs to be fully composted unless applied to fields with crops not for human consumption, or

❖ Be incorporated into the soil 120 days prior to harvest for crops whose edible portion has direct contact with the soil, or be incorporated into the soil 90 days prior to harvest for all other crops for human consumption.

Compost Use. NOP Section Rule 205.203(c)(2) requires that:

❖ The C:N ratio of compost components be between 25:1 and 40:1

❖ Temperatures between 131° F and 170° F be maintained and recorded for a specific number of days, depending on the method of composting (see Rule annotation)

❖ Compost Records are maintained, and will be available for Inspector review.

Manure

1. Do you use raw or “aged” manure?

☐ Yes   ☐ No   ☐ NA

2. If Yes, check how your use of raw or “aged” manure is compliant with NOP standards: Manure is:

☐ Applied to land producing a crop not intended for human consumption (pasture, hay, cover crops, etc.)☐ Incorporated at least 120 days before harvest of a crop whose edible portion may contact the soil surface or soil particles☐ Incorporated at least 90 days before harvest of a crop whose edible portion does not directly contact the soil surface or soil particles.☐ A pelletized manure product listed or documented to meet NOP requirements of heating at 150° F for one hour or 165° F with <12% moisture content, or other procedure compliant with NOP Guidance 5006 on processed manure.

3. \_\_\_\_\_Initial here to indicate that you understand that you are required to show records of manure use which include locations where it was applied, date applied, crops being grown where it was applied and anticipated date of first harvest.

4. If you use off -farm manure, list source(s) and livestock type:

## **Compost**

5. Do you purchase compost for field use? ☐ Yes ☐ No

• Compost is included on Materials List \_\_\_\_\_

6. If Yes, list all composts on your Materials Use List. If bulk compost is used, you must attach a current letter from your supplier verifying that compost was produced in compliance with NOP regulations.

7. Do you produce compost?

☐ No; if no compost is produced, skip to "Soil and Water Quality" section

☐ Yes, compost contains *only* plant materials (no manure or other animal materials)

List plant material sources \_\_\_\_\_

☐ Yes, compost contains *both* plant and animal materials

8. If Yes to *both*, list all compost ingredients; describe your composting method(s) in-vessel, static pile, or windrow, include temperatures reached, timelines for production and aeration methods:

9. Do you maintain records of your compost production?

☐ Yes ☐ No

10. \_\_\_\_\_ **Initial here to indicate that you understand that you are required to provide compost records when *both* plant and animal materials are used.**

**Note:** If compost production that includes manure as an ingredient does not comply with NOP standards in §205.203(c)(2), or NOP Guidance 5021, *the compost is considered raw manure*. Please complete the section below.

## **Soil and Water Quality**

11. Describe how you manage manure, and compost production to protect crops, soil, and water (wells, aquifer, ponds, reservoirs, lakes, streams, etc.) from contamination by plant nutrients, heavy metals or pathogenic organisms.

(Examples include: use of feeding pads; frequent manure removal, application and incorporation; stockpile manure/produce and store compost away from water/drainage areas; manure "applied" by grazing livestock; manure storage/composting on impermeable pads, or covered to prevent leaching, etc.)

**Section 12: Pest, Disease and Weed Management §205.206, §205.600-602, §205.103**

- ❖ Document last year’s pest problems encountered in your organic production
- ❖ “Pest” includes; insects, weeds, diseases, animals, etc.
- ❖ Use “minor,” “moderate,” or “major” to report severity
- ❖ Use “not very,” “somewhat,” or “very” to report effectiveness

**1. Pest Control Table:**

Field/Plot ID	Crop	Pest Type	Problem Severity	Action(s) Taken	Material Used	Effectiveness

2. Describe how you monitor your pest management program:

3. Describe how you know that your pest management program is effective:

4. Describe the records you maintain for your pest, weed and disease management on your farm.

**Please Note:** USDA organic regulations require that organic producers implement farm management practices that prevent weeds, disease and pest. Management practices may include cultural practices, mechanical methods, and physical methods. Preventive practices must be tried and found to be ineffective before the use of any materials to control weeds, disease and pest. If preventative pest control strategies are not effective and you plan on applying pest control materials, please make sure that the materials used for pest control are listed on your materials list table on page five of this Organic System Plan.

#### 5. Preventative Pest, Disease and Weed Management:

Check the preventative weed control strategies you implement on your operation:

- ☐ Mowing      ☐ Flame Weeding      ☐ Mechanical Cultivation      ☐ Crop Rotation      ☐ Natural Mulch  
☐ Stale Seed Bed      ☐ Plastic Mulch      ☐ Cover Crops      ☐ Hand Weeding      ☐ Livestock Grazing  
☐ Other (please specify) \_\_\_\_\_

If you are flame weeding, please specify the type of fuel used \_\_\_\_\_

If you use plastic or other synthetic mulches, is the mulch removed at the end of each growing season?

- ☐ Yes   ☐ No   ☐ N/A

If you are using recycled paper products for mulch, are you removing gloss or colored paper before field application?

- ☐ Yes   ☐ No   ☐ N/A

Check the preventative disease control strategies you implement on your operation:

- ☐ Crop Rotation      ☐ Disease Resistant Varieties      ☐ Microbial Treatments      ☐ Companion Plantings  
☐ Field Sanitation      ☐ Water/Irrigation Management      ☐ Soil Solarization  
☐ Other (Please Specify) \_\_\_\_\_

Check the preventative pest control strategies you implement on your farming operation:

- ☐ Crop Rotation      ☐ Physical Barriers      ☐ Physical removal      ☐ Beneficial insects      ☐ Insect/rodent traps  
☐ Companion planting      ☐ Habitat for Beneficial Organisms      ☐ Repellants      ☐ Scare Tactics  
☐ Other (Please Specify) \_\_\_\_\_



**SECTION 13: Prevention of Commingling & Contamination / Crop Post-Harvest Handling §205.201(a)(5), .202(c), .270-.271**

- ❖ Describe your management practices and physical barriers implemented to minimize and/or prevent contamination or commingling of organic product with prohibited substances or non-organic product

**Treated Lumber**

1. Is treated lumber used anywhere on your farm? ☐ Yes ☐ No

If Yes, explain where it is located and how contact between the treated wood and soil and crops is avoided:

**Irrigation Water**

2. Do you irrigate? ☐ Yes ☐ No If No, skip to "Materials Storage"

If Yes, indicate the water source and describe your irrigation system:

Describe how you assess and manage potential risks of contamination of the irrigation water:

**Split Operation**

3. If you have a split operation, do you use water to apply any prohibited substances in your non-organic production? If so, how do you prevent contamination of your organic crops? ☐ **NA, organic production only**

**Materials Storage**

4. Do you store any prohibited materials on farm? ☐ Yes ☐ No

If Yes, how do you clearly identify and separate allowed and prohibited materials:

## **Farm Equipment**

- Confirm records, such as cleaning logs, verifying that steps have been taken to prevent contamination of an organic crop will be available during your inspection\_\_\_\_\_

Do you have contracted work done on your organic fields or pastures such as; planting, material application, harvesting and/or transportation, where off-farm equipment will be used or you loan/rent-out your equipment? ☐ Yes ☐ No

Do you operate your own equipment on property that is not certified organic? ☐ Yes ☐ No

**If you answered yes to the above questions in this section, complete the farm equipment table below.**

**Farm Equipment Table:** List equipment that is used on non-certified land prior to use on certified parcels.

Equipment	Cleaning Log Kept Y/N

For equipment used on organic and conventional crops and for equipment used for custom work, explain the cleaning steps that are in place and how you verify that the equipment was cleaned prior to use on your organic parcels:

## **Harvesting**

8. Describe your harvest practices; include equipment and containers that are used and how contamination is prevented:

## **Post-Harvest Crop Handling/Cleaning**

●All cleaners are included on the Materials List\_\_\_\_\_

9. Describe the type(s) of post-harvest crop handling you perform:

10. Describe how you clean your post-harvest crop handling area, including any food contact surfaces:

### **Post-Harvest Pest Control**

•Product(s) are listed on Materials List\_\_\_\_\_

11. Describe the strategies you use, or plan to use, to manage pest problems in your post-harvest handling facility:

12. How do you monitor the effectiveness of your pest control strategies:

### **Containers**

- ❖ Containers, bins, and packaging materials must not contain synthetic fungicides, preservatives, or fumigants; and all reusable containers must be thoroughly cleaned and pose no risk of contamination prior to use for organic crops

13. Describe the types of containers used for harvesting and how they are cleaned:

14. Describe the specific types of packaging used for sales, storage and/or shipping and how they are cleaned:

**Product Storage**☐ NA; no crops are stored

15. Describe your crop storage practices:

16. Please list all on-site storage areas that you manage, or contracted facilities with stand-alone certification.

Crop	Type of Storage	Size/Capacity	Location: On-site or Other Facility Name	Certifier (if contracted)

17. If crops are stored with non-organic products, describe how you prevent commingling and contamination:

☐ NA, organic only**Transport**☐ Not Applicable; all crops/products are sold before transport18. Please describe the containers, equipment and vehicles used to transport harvested crops, how contamination is prevented during transportation and describe destination(s):**SECTION 14: Labeling, Audit trail and Marketing §205.103, §205.201, .205, .271, .300-311****Labeling**

1. Under what name(s), label(s) or brand(s) do you market your crops?

2. What kind of labeling do you use? Check all that apply

☐ No product labels used☐ Retail labels and signage

If retail labels and signage are used, please explain types used; \_\_\_\_\_

3. Does your label for packaged agricultural products comply with NOP §205.303(b)(2)?

☐ Yes ☐ No

4. If you use a label, please provide copies of all organic product labels used.

☐ Current label previously approved by NHDAMF on file☐ New label(s) attached for review (Labels must be approved before use.)

5. Will the USDA Organic Seal be used?

☐ Yes ☐ No

6. Will the NHDAMF Certified Organic Logo be used?

☐ Yes ☐ No

**Audit Trace Back §205.103**

- ❖ An audit trace back of an agricultural crop, randomly chosen by the inspector, will be performed at the time of your inspection.
- ❖ This trace back will involve reviewing the record trail of the crop from the total sales- storage- harvest- back to site/field ID

Describe your recording keeping practices as they address production, harvesting and handling of your agricultural crop. Utilizing your system, demonstrate how a particular crop can be successfully traced back from sale(s) to production site:

**Marketing Information** Provide **name & location** for all sales outlets of organic product:

☐ Farm retail or farm stand:

☐ Summer Farmers Markets:

☐ Winter Farmers Markets (include crops sold):

☐ Direct to retail:

☐ CSA/subscription service (#members/shares):

☐ Wholesale:

☐ Bulk commodities to processor:

☐ Contract to buyer:

☐ Food Service Establishment:

Do you buy in any organic product for resale? ☐ Yes ☐ No

Is it certified organic? ☐ Yes ☐ No

If yes, provide type of organic product purchased, source and organic verification:

If you buy in non-organic product, describe how organic and non-organic products are segregated and labeled:

## Section 15: International Import and Export Activity

This section must be completed

For more information please visit <https://www.ams.usda.gov/services/organic-certification/international-trade>

If this section does not apply, please initial here: \_\_\_\_\_

### I. Import

N/A ☐

1. From which countries do you or do plan to import any ingredients to be used in your product (s):

☐ Canada ☐ European Union ☐ Japan ☐ Republic of Korea ☐ Taiwan ☐ Switzerland

☐ Other(s): \_\_\_\_\_

Attach a copy of your procedures (SOP) to verify that imported organic products comply with the USDA organic regulations. Attached \_\_\_\_\_

List each product or substance intended to be imported, the source, and indicate the frequency of import:

---

---

---

---

---

### II. Export

N/A ☐

To which countries do you export or plan to export any products:

☐ Canada ☐ European Union ☐ Japan ☐ Republic of Korea ☐ Taiwan ☐ Switzerland

☐ Other(s): \_\_\_\_\_

Attach a copy of your process (SOP) to verify compliance with the terms of the arrangement with each applicable country to include, but not limited to, the required documentation with every shipment and product labels.

Attached \_\_\_\_\_

List all products intended for export, the country, and frequency of export: \_\_\_\_\_

---

---

## Section 16: Attachments

Confirm you have attached the following required documents \_\_\_\_\_

- ☐ Field Maps
- ☐ Landowner Statement, if applicable
- ☐ Organic Certificate Verification: Seedlings
- ☐ Crop Rotation Plans
- ☐ Compost and/or Materials Verification Letter, if applicable
- ☐ New or Revised Labels or Marketing Materials, if used

**PAYMENT: \$205.400**

Certification Fee:	\$100.00	
Inspection Fee:		Total square feet of production to be certified _____ Refer to Table 911-1 to determine inspection fee and list in the box.
Total Fees Submitted:		Make Checks payable to: " <u>TREASURER, STATE OF NH</u> "

Table 911-1

Production Type	Fee	Fee	Fee	Fee	Fee	Fee
	\$50	\$100	\$200	\$300	\$400	\$500
Agronomic crops, including hay & pasture; production # acres	50 or less	>50-100	>100-200	>200-300	>300-400	>400
Horticultural crops, including fruits & vegetable; production # acres	10 or less	>10-25	>25-75	>75-100	>100-250	>250
# Sq. Ft. controlled environment production	2000 or less	>2000-4000	>4000-6000	>6000-10,000	>10,000-20,000	>20,000

Mail completed Organic System Plan, Attachments and Payment to:

NH Department of Agriculture, Markets & Food

Attn: Division of Regulatory Services

PO Box 2042

Concord, NH 03302-2042

If you should have any questions, please call Regulatory Services at (603) 271-3685